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## \*BIBDATASHEET\*

CONFIRMATION NO. 6719

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/824,778	<b>FILING OR 371(c) DATE</b> 04/14/2004 <b>RULE</b> 1.47	<b>CLASS</b> 239	<b>GROUP ART UNIT</b> 3752	<b>ATTORNEY DOCKET NO.</b> 3558.1000-004
<b>APPLICANTS</b> Dino J. Farina, Holliston, MA; Donald C. Swavely, Norton, MA; John A. Vennari, New London, CT; Leticia M. Broome, Wayland, MA; Franklin A. Bales, Lelund, NC;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/462,861 04/14/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 06/26/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 18	<b>TOTAL CLAIMS</b> 15
Verified and Acknowledged <input checked="" type="checkbox"/> Examiner's Signature <i>JS</i> Initials <i>JS</i>		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 021005				
<b>TITLE</b> METHOD OF SERVICING COMPANIES ASSOCIATED WITH A SPRAY DEVICE OPERATING UNDER GUIDELINES OF A REGULATORY BODY				
<b>FILING FEE RECEIVED</b> 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	